FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-02								
Estimated average burden								
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	Check this box if no longer subject
	to Section 16. Form 4 or Form 5
\cup	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Singh Amit K.				2. Issuer Name and Ticker or Trading Symbol Asana, Inc. [ASAN]								(Che	5. Relationship of Reporti (Check all applicable) X Director			on(s) to I			
(Last)	(Fi	rst) (N	/liddle)	3. Date of Earliest Transaction (Month/Day/Year) 08/01/2023									Office	er (give title v)		Other (s	specify		
C/O ASANA, INC. 633 FOLSOM STREET, SUITE 100				4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) SAN	SAN CA 94107													Form filed by More than One Reporting Person					
FRANC!	ISCO					Rule 10b5-1(c) Transaction Indication													
(City)	(St	ate) (Z	(ip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											ended to			
		Table	l - No	n-Deriva	tive S	ecur	ities Acq	juired,	Dis	posed of	, or	Ben	eficial	ly Owr	ned				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date			3. Transaction Code (Instr. 8)		4. Securities Acquired (Disposed Of (D) (Instr. 3 5)			Benefi Owned Follow	ties cially I ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A (D) or)	Price		ted action(s) 3 and 4)				
Class A Common Stock 08/01/2				2023			A		432(1)		A	\$0.00	.00 23,509		1				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date (Month/Day/Year) Execution Date		tion Date,	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	(Month/Day/		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Ov Fo Di or (I)	wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A) (D)	Date Exercisa	ıble	Expiration Date	Title	or Nun of							

Explanation of Responses:

1. These shares represent the Class A Common Stock that the Reporting Person elected to receive in lieu of cash compensation under the Issuer's Non-Employee Director Compensation Policy for the quarter ended July 31, 2023. The number of shares of Class A Common Stock received in lieu of cash was calculated based on the closing price of a share of Class A Common Stock on July 31, 2023. Pursuant to the Issuer's Directors' Deferred Compensation Plan, the Reporting Person elected to defer the receipt of such shares to a future date in accordance with the terms of such plan and the Reporting Person's plan election.

Remarks:

/s/ Katie Colendich, Attorney-08/03/2023 in-Fact

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.